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Fill in this inform	ation to identify	your case:		I		
Trac	cy Mack					
Debtor 1 First N		Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First N	lame	Middle Name	Last Name			
United States Bankri	untcy Court for the:	Eastern District of Pennsy	/Ivania			
	-12829			Ob 1: '6 4b	.:_ :	
(If known)	.2020		_	Check if the	nis is: ended filing	
				_	-	stpetition chapter 13
					as of the following	
Official Form	106l			MM / D	D/ YYYY	
Schedul	e I: You	ır Income				12/15
Po so complete on	d coourate co na	socible If two morried n	eople are filing together (Deb	tor 4 and Dahta	r 2) beth are equally	v reeneneible for
•	cribe Employm		ages, write your name and ca	ase number (ii k	nown, Answer ever	y question.
 Fill in your emp information. 	oloyment		Debtor 1		Debtor 2 or non-	-filing spouse
If you have more attach a separate information about employers.	te page with	Employment status			☐ Employed☐ Not employed	d
Include part-time self-employed w						
Occupation may or homemaker,	/ include student if it applies.	Occupation	Human Resources			
		Employer's name	MONARCH STAFFING			
		Employer's address	I0 BALTIMORE PIKE STE	В		
		Employer's address			Number Street	
			SPRINGFIELD, PA 19064			
			City State 2	ZIP Code	City	State ZIP Code
		How long employed th	nere? 1			
Part 2: Give	Details About	Monthly Income				
spouse unless y	ou are separated		rm. If you have nothing to repo	• •		,
		ave more than one emplo ttach a separate sheet to	yer, combine the information fo this form.	n an employers to	or mai person on the II	iiies
				For Debtor 1	For Debtor 2 or	

4. Calculate gross income. Add line 2 + line 3. 4. \$_8627.48 \$______

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

non-filing spouse

\$_8627.48

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Debtor 1

Tracy Mack

iacy ivia	CK		
irst Name	Middle Name	Last Name	

Case number (if known) 22-12829

		For	Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$_	8627.48	\$	
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	2457.12	\$	
5b. Mandatory contributions for retirement plans	5b.	\$		\$	
5c. Voluntary contributions for retirement plans	5c.	\$			
5d. Required repayments of retirement fund loans	5d.	\$		\$	
5e. Insurance	5e.	\$		\$	
5f. Domestic support obligations	5f.	\$		\$	
5g. Union dues	5g.	\$		\$	
5h. Other deductions. Specify:	•	 		+ \$	
	5h.	+\$		+ \$	
 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 	. 6.	\$	2457.12	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	6170.36	\$	
3. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	_	\$		\$	
monthly net income.	8a.				
8b. Interest and dividends	8b.	\$		\$	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent				
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		\$	
8d. Unemployment compensation	8d.	\$		\$	
8e. Social Security	8e.	\$		\$	
8f. Other government assistance that you regularly receive					
Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
Specify:	8f.	\$		\$	
8g. Pension or retirement income	8g.	\$		\$	
8h. Other monthly income. Specify:	8h.	+\$_		+\$	_
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$		\$	
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	\$	6170.36	+ \$	= \$6170.36
1. State all other regular contributions to the expenses that you list in <i>Sche</i>					
Include contributions from an unmarried partner, members of your household, friends or relatives.	,	•		•	
Do not include any amounts already included in lines 2-10 or amounts that are			e to pay expe		
Specify:				11.	+ \$
2. Add the amount in the last column of line 10 to the amount in line 11. The				•	s 6170.36
Write that amount on the Summary of Your Assets and Liabilities and Certain	Statist	ıcal Inf	ormation, if it	applies 12.	Combined
					monthly incom
13. Do you expect an increase or decrease within the year after you file this	form	?			-
☑ No.					
Yes. Explain:					